(CFA-4) **Summary Sheet** 

State Form 4606 (R9 /11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

| INSTRUCTIONS: Please type<br>this form. For assistance in ca<br>side. | e or print l<br>ompleting | legibly IN B<br>this form, s | LACK INK all inform<br>see instructions on th<br>2002 | e reverse   | PM | 2: | 50 |
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| COMMITTEE INFO  | RMATION                  |  |                           |
|---|--------------------------|--|---------------------------|
| Full name of committee (as on Statement of Organization) Check if this is a new name  |                          |  |                           |
| SNYDER ELECTION COMMITTEE   | ACT WE ARRESTED WITH     | Name and Address of the Property of the Proper |                           |
| Acronym or abbreviated name, if any   | 3. Committee tel         |  | Smark etil treebili nolit |
| is look and transfer in This figure and the state of the pages of Schadul   | (317                     | 1877-2910  |                           |
| . Mailing address (address where all campaign finance correspondence is received)   | Check if this is a new a | address  |                           |
| City, state, ZIP code   | 6. Party affiliation     | (if applicable)   /  |                           |
| NOBLES VILLE, IN, 46060   |                          | Republican   | 1                         |
| · CANDIDATE INFORMATION (For Can  | didate's Committ         | ees Only)  |                           |
| Full name of candidate (include any nickname)   | 8. Party affiliation     | or if independent  | 11                        |
| JAMES R. SNYDER   | 1                        | 2 EPUBLICA!  | V                         |
| Office sought (Include district number, if any. Not required for exploratory committee.)  NON E   | 10. County of res        | HAMILTON   | /                         |
| TYPE OF REPORT  |                          | THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IN COLUMN  | CANDIDATES ONL            |
| . Check one:  |                          | Check one:   | CANDIDATES ONE            |
| Pre-Primary Pre-Election Annual Final / Disbands Committee (lines 18, 19, a   | and 20 must be "0")      | Pre-Convention   |                           |
| Outgoing Treasurer (within 10 days amend Statement of Organization)   |                          | Post-Convention  |                           |
| . Reporting period:   | tion was a sta           | COLUMN A   | COLUMN B                  |
| From:  - -0  Through: 12-31-0   | /                        | This Period  | Year to Date              |
|   |                          |  |                           |
| Cash on hand and investments at the beginning of this reporting period.   | ession people to         | 98.71  |                           |
| Cash on hand and investments January 1, current year.   |                          | 98.71  | 38-71                     |
| Cash on hand and investments January 1, current year.  CONTRIBUTIONS AND RECEIPTS   |                          | 98.71  | 38-71                     |
| Cash on hand and investments January 1, current year.  CONTRIBUTIONS AND RECEIPTS  (Note: these amounts include in-kind contributions and loans, as well as cash contributions)   | tributions.)             | 98.71  | 38-71                     |
| Cash on hand and investments January 1, current year.  CONTRIBUTIONS AND RECEIPTS  (Note: these amounts include in-kind contributions and loans, as well as cash contact.)  15a. Itemized (use Schedule A)  | tributions.)             | 98.71  | 38.71                     |
| Contributions and loans, as well as cash contributions and loans, as well as cash contributions (use Schedule A)  15b. Unitemized   | of the candida           | 98.71  | 38-71                     |
| (Note: these amounts include in-kind contributions and loans, as well as cash contains. Itemized (use Schedule A)  15b. Unitemized  15c. Add lines 15a, and 15b in both columns   | subtotal Total           | 98.71  | 38-71                     |
| (Note: these amounts include in-kind contributions and loans, as well as cash contains. Itemized (use Schedule A)  15b. Unitemized  15c. Add lines 15a, and 15b in both columns   | SUBTOTAL                 | 98.71  | 38-71                     |
| (Note: these amounts include in-kind contributions and loans, as well as cash | SUBTOTAL                 | 98.71  | 38-71                     |
| (Note: These amounts include in-kind contributions 15 can | SUBTOTAL                 | Ö  | 0                         |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.                           | SUBTOTAL                 | 98.71  | 0                         |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributed loan intermized (use Schedule A)  15b. Unitemized (use Schedule B) (Public Question: use Schedule C)  17b. Unitemized  | SUBTOTAL                 | Ö  | 0                         |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions. It is a cash contributions and loans, as well as cash contributions and loans, as well as cash contributions. It is a cash contributions and loans and loan separate and loan separate and loans. It is a cash contribution as well as cash contributions and loans as well as cash contributions. It is a cash contributions and loans, as well as cash contributions.   | SUBTOTAL TOTAL SUBTOTAL  | 60.00  | 0                         |
| CONTRIBUTIONS AND RECEIPTS  (Note: these amounts include in-kind contributions and loans, as well as cash contained.)  15a. Itemized (use Schedule A)  15b. Unitemized  15c. Add lines 15a, and 15b in both columns  16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B  EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)  17b. Unitemized  17c. Add lines 17a and 17b in both columns  8. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)   | SUBTOTAL TOTAL SUBTOTAL  | 60.00  | 0                         |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions. It is a cash contributions and loans, as well as cash contributions and loans, as well as cash contributed.  15a. Itemized (use Schedule A)  15b. Unitemized  16c. Add lines 13 and 15b in both columns and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)  17b. Unitemized  17c. Add lines 17a and 17b in both columns   | SUBTOTAL TOTAL SUBTOTAL  | 60.00  | 0                         |

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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| CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)                        | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT                 | COLUMN A<br>AMOUNT THIS<br>PERIOD                   | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE               | DATE RECEIVED RECEIVED BY                           |
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| Contributor's Occupation (if required)   | ☐ Interest ☐ Loan☐ Misc (specify)                        | edition a ga  | not nothernal  | REDRIANT  |
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|  | Other Receipts:  Interest □ Loan  Misc (specify)         | 3 PERIOD:   | HT THUOM   | Some period   |
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| Contributor's Occupation (if required)   |  |   |  |   |
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| Contributor's Occupation (if required)   | _  |   |  |   |
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## (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS   | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT            | COLUMN A<br>AMOUNT THIS<br>PERIOD             | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE  | DATE RECEIVED BY         |
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| 5.   | Contributions:  Direct In-Kind (describe)           |   |   |                          |
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## (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

#### Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS   | TYPE OF CONTRIBUTION OR OTHER RECEIPT              | COLUMN A<br>AMOUNT THIS       | COLUMN B<br>CUMULATIVE  | DATE RECEIVE               |
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| 4 clubered with language and your almost II. A expense to age.   | Contributions:  Direct In-Kind (describe)          | P SCHEDUL<br>AL OF ALL PA     | HIS PAGE C  | T JATOTSU                  |
| Jesui 2  | Other Receipts:   Interest   Loan   Misc (specify) | Hugi antraka                  | A sloter  | ar popes on 5              |
| 5.   | Contributions:  Direct In-Kind (describe)          |                               |   |                            |
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## (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfersing and in-kind contributions regardless of the amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS   | TYPE OF CONTRIBUTION OR OTHER RECEIPT               | COLUMN A<br>AMOUNT THIS                            | COLUMN B<br>CUMULATIVE  | DATE RECEIVE                     |
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#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

#### Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS   | TYPE OF CONTRIBUTION OR OTHER RECEIPT               | COLUMN A<br>AMOUNT THIS   | COLUMN B<br>CUMULATIVE        | DATE RECEIVE    |
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

#### (CFA-4 SCHEDULE B) Itemized Expenditures

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

| RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)   | RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable  | TYPE OF EXPENDITURE and PURPOSE (be specific)                        | COLUMN A<br>AMOUNT THIS<br>PERIOD                      | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE   | DATE OF<br>EXPENDITURE   |
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES

| For | Dublia  | Questions |
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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

| Enter Text of Public Question   |                     | PUBLIC QUESTION INFORMATION   |                                   | duy and to be  | ant roles              |
|---|---------------------|---|-----------------------------------|--|------------------------|
|   | je or local         |   |                                   |  |                        |
| Type of Question: Statewide Loc<br>Position: Supported Opposed                  | ai                  |   |                                   |  |                        |
| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code) | TYPE OF EXPENDITURE | PURPOSE OF EXPENDITURE<br>(be specific)                               | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE   | DATE OF<br>EXPENDITURE |
| dicate any seimbutasment.   | Direct              | ings of expenditure.  | E: Check the<br>Trucks: Endr      | EXPENDITURE OF EXPEN   | ROBERT SOR             |
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE D) Debts Owed by This Committee

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| <br>        |                  |

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

| CREDITOR'S OR LENDER'S NAME  | ENDORSER'S OR VENDOR'S<br>NAME & MAILING ADDRESS (if any) | AMOUNT  | DATE DEBT<br>INCURRED | CUMULATIVE<br>PAID          | OUTSTANDIN<br>BALANCE TH |
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| & MAILING ADDRESS<br>(street, number, city, state, ZIP code)   | (street, number, city, state, ZIP code)                   | NATURE OF DEBT  | INCORRED              | YEAR-TO-DATE                | PERIOD                   |
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(CFA-4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE

| State Form 4606 (R9 / 11-99) |               |
|------------------------------|---------------|
| Indiana Election Commission  | (IC 3-9-5-14) |
| Approved by State Board of A | ccounts 1999  |

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts, loans, regardless of amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

| BORROWER'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code) |  | ORIGINAL AMOUNT   | DATE DEBT<br>- INCURRED                                 | CUMULATIVE<br>PAID<br>YEAR-TO-DATE                                   | OUTSTANDING<br>BALANCE THIS         |
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